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## **Application Number** 09/187,370 **CHANGE OF Filling Date** November 6, 1998 **CORRESPONDENCE ADDRESS First Named Inventor** Donald C. Wilcoxson **Application** Address to: Group Art Unit 2666 Assistant Commissioner for Patents **Examiner Name** ABELSON, RONALD B. shington, D.C. 20231

**Attorney Docket Number** 4675-000216 lease change the Correspondence Address for the above-identified application to:  $\boxtimes$ Customer Number 27572 27572 Type Customer Number here OR Firm or RECEIVED Individual Name **Address** APR 3 0 200 **Address** Technology Center 2600 City ZIP State Country Fax Telephone This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124). I am the: Applicant/Inventor. Assignee of record of the entire interest. Certificate under 37 CFR 3.73(b) is enclosed (Form PTO/SB/96). Attorney or agent of record. Registered practioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number Typed or G. Gregory Schivley **Printed Name** Signature April\_16.2003 Date NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below\*.

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